



Incident Report

Print Date/Time: 07/25/2016 14:38

Login ID: ss0143

Lake Stevens Police Department

ORI Number: WA0311900

Incident: 2016-00014332

Incident Date/Time: 7/23/2016 9:35:13 AM
Location: 7100 BLK 20TH ST SE
LAKE STEVENS WA 98258
Phone Number: (425) 359-6561
Report Required: No
Prior Hazards: No
LE Case Number:

Incident Type: Civil
Venue: Lake Stevens
Source: 911
Priority: 4
Status: 4
Nature of Call:

Unit/Personnel

Unit	Personnel
19D2	SS0132-Kilroy
19D3	SS0134-Lyons

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	BILLETT, TAYLOR		(425) 359-6561			

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
Involved Vehicle						AMK6769	
Involved Vehicle						AUD0615	

Disposition(s)

Disposition	Count
S	1

Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
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07/23/2016 : 09:53:08 ss0132 Narrative: Civil. Female driver getting checked for neck pain. No air back deployment.
07/23/2016 : 09:50:47 sp0251 Narrative: 1 YELLOW
07/23/2016 : 09:39:44 SP0263 Narrative: OTHER DRIVER PH (360)926-4106 DAVID, RP PH SHOWS 911 ONLY
07/23/2016 : 09:37:49 SP0263 Narrative: RP IN BLK CIVIC
07/23/2016 : 09:37:38 SP0263 Narrative: NON BLKNG, PULLED OVER
07/23/2016 : 09:37:29 SP0263 Narrative: BLK HONDA CIVIC HIT BY SILV HONDA CIVIC
07/23/2016 : 09:37:05 SP0263 Narrative: WB 2 VEHS, REAR END, FEM C/O NECK

COLLISION REPORT

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591971

REPORT NO. **E566298**CASE # **2016-00014332**LOCAL AGENCY
CODINGTOTAL # OF
UNITS **02** OBJECT
STRUCKTRIBAL
RESERVATIONDATE OF COLLISION **07** - **23** - **2016** TIME (2400) **0935** COUNTY # **31** MILES **N** **E** **IN** **OF** **0664**ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ NON-INTERSECTION ☒
20TH ST SE BLOCK NO. ☒ **7100**
MILE POSTDISTANCE **200** **00** MILES ☒ **N** **E** ☒ **CAVALERO RD**
FEET ☒ **S** ☒ **W**UNIT 01 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☐ NO ☒ PHONE **D: 3609264106**LAST NAME **SHIMA** FIRST NAME **DAVID** MIDDLE INITIAL **A**STREET NEW ADDRESS **1317 85TH AVE SE**CITY **LAKE STEVENS** ST **WA** ZIP **98258**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **SHIMADA117P3** STATE **WA** SEX **M** D.O.B. **10** - **23** - **1989**ON DUTY ☐ STATUS AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE INJURY CLASS **1** NATURE OF INJURIESLICENSE PLATE # **AMK6769** STATE **WA** VIN# **2HGFG11896H558175**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2006** MAKE **HOND** MODEL **CIVIC** STYLE **CP** VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒REGISTERED OWNER INFO. **DAVID SHIMA 1317 85TH AVE SE LAKE STEVENS WA 98258 D: 3609264106**LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **GEICO 4431146085**VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGEUNIT 02 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☐ NO ☒ PHONE **D: 4253596561**LAST NAME **BILLETT** FIRST NAME **TAYLOR** MIDDLE INITIAL **N**STREET NEW ADDRESS **510 87TH DR SE**CITY **LAKE STEVENS** ST **WA** ZIP **98258**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **BILLETN023QR** STATE **WA** SEX **F** D.O.B. **11** - **19** - **1998**ON DUTY ☐ STATUS AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE INJURY CLASS **7** NATURE OF INJURIES **NECK**LICENSE PLATE # **AUD0615** STATE **WA** VIN# **2HGEJ6677WH549503**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **1998** MAKE **HOND** MODEL **CIVIC** STYLE **4D** VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **AMERIPRISE AX01580875**VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGEOFFICER'S NAME (PRINT) **J. KILROY #0132** BADGE OR ID # **#0132** AGENCY **WA0311900**


**STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT**


1591972

CORRECTION

REPORT NO. **E566298**CASE # **2016-00014332**
ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-				
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-				
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-				
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

Unit 1 was traveling west on 20th St SE in the 7100 block. Unit 2 was traveling west on 20th St Se in the 7100 starting to slow down due to traffic. Unit 1 was following too closely and hit unit 2 before he could slow down.

Both vehicles were driven from the scene.

Driver of unit 2 was checked by aid for neck pain.

Unit 1 was at fault due to following too close.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

J. KILROY #0132
07-23-16 05:38 PM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

W. AUKERMAN 0072

DATE

7/24/2016 6:13:41 PM

BADGE OR ID #

#0132

ORI #

WA0311900

TIME POLICE DISPATCHED

9:37 AM

TIME POLICE ARRIVED

9:39 AM
PART B 3000-345-160 R (7/06)

PAGE

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OF

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REPORT NO. E566298

CASE # 2016-00014332

DATE AND TIME
OF COLLISION 07/23/16 09:35



Not To Scale

7100 Block of 20th ST SE



Unit 2

Unit 1